

**Work Order ID 96713**

Monday, February 11, 2013 3:00:28 PM

**\*96713\***

Page 1

Item ID: D2230-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Lug

Stop

**\*NS2\***

Start Date: 1/31/2013 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 2/1/2013 Req'd Qty: 4.00

**\*4\***

Customer: CU-DAR001

Reference: RMA RA111463 - RETURN

Approvals:

Process Plan: *MF*Date: *13-2-11*

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								

D2230	Rev G								
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100

0.00

**\*100\***

QC

Quality Control

Memo

0.00

INSPECT RA 111463 D2230-1 X 4 B#89415

*5-11-13*

NEEDS TO HAVE ORIGINAL B#'S REMOVED

~~Stamp + Re Power unit~~

110

0.00

**\*110\***

Packaging

Packaging

Memo

0.00

REMOVE OLD BATCH NUMBER AND STAMP ON NEW BATCH  
NUMBER*→ 4 16 13-5-8**+ Re Power Unit.**5-11-13**Start 810**F. in 840.**H of BL 13-5-9.**temp 320°**temp**M125069*

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**Item ID:** D2230-1

**Revision ID:**

**Item Name:** Lug

**Start Date:** 1/31/2013 **Start Qty:** 4.00

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

**Required Date:** 2/1/2013 **Req'd Qty:** 4.00

**\*4\***  
**\*4\***

**Cust Item ID:**

**Customer:** CU-DAR001

**Reference:** RMA RA111463

**Approvals:**

**Process Plan:**

**Date:**

**Tooling:**

**Date:**

Run Start

**\*NR1\***

**QC:**

**Date:**

**SPC (Y/N):**

**Date:**

Stop

**\*NR2\***

**Sequence ID/  
Work Center ID**

**Operation  
Description**

**Set Up/  
Run Hours**

**Tool ID**

**Tool #**

**Plan  
Code**

**Accept  
Qty**

**Reject  
Qty**

**Reject  
Number**

**Insp.  
Stamp**

120

**\*120\***

QC

Quality Control

QC4- 100% Inspect kits for completeness

0.00

*Smt*

0.00

*B-S-14*

*4*

130

**\*130\***

Packaging

Packaging

Identify as per dwg & Stock Location: *ST 469* 0.00

0.00

Memo

ID AND STOCK UNDER NEW BATCH NUMBER

*4/4*

*SP*

*B-S-15*

140

**\*140\***

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

*13/5/11*

*13-05-16*

# Picklist Print

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Page 1

Work Order ID: 96713

Parent Item: D2230-1

Parent Item Name: Lug

Start Date: 1/31/2013

Required Date: 2/1/2013

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP D00.11.01 Added inspection level 8, and removed P/O for powder coatEC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2230-1		Manufactured	No				Each	360.0000		4			
Lug													
				<u>Location</u>			<u>Loc Qty</u>		<u>Loc Code</u>				
				FG			4						
					84136		4						
				ST469			356						
					89783		16						
					92209		40						
					95217		200						
					95442		100						

4 x 89415  
MF  
13-2-11

# **RA 111463**

Received @ Dart January 14<sup>th</sup>, 2013  
Inspected @ Dart January 30<sup>th</sup>, 2013

Customer: E.C.S.A. HELI-ANCON  
Customer Contact: TAMARA SEPULVEDA  
Shipped from: DORAL FL, USA

## **Instructions for RA 111463**

- D2230-1 B89415 qty x 4 returned
  - Needs to have original B#'s removed
  - needs work order for restocking
  - needs new B# stamped on
- D2230-3 B9228 qty x 4 returned
  - Needs to have original B#'s removed
  - needs work order for restocking
  - needs new B# stamped on

**Time Estimate** = 1 HOUR ONLY (stores)

**Departments Required:** Stores (restocking)

**Pictures Attached** = NO

**QTY INSPECTED** = x4 D2230-1  
x4 D2230-3

**THIS INSTRUCTION SHEET MUST  
BE ATTACHED TO THE  
RESTOCKING WORK ORDER AT  
ALL TIMES!!!!**

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS											
Part No. _____		Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>							
NCR No. _____		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>							
Work Order Update <input type="checkbox"/>		Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>						Other <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
														<input type="checkbox"/> Other	